BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

096 98241

(Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS		10				Г	RATE	FEE		RATE	FEE	
FOR		NUMBER F	ILED	NUMB	ER EXTRA	Ī	BASIC FEE		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			(p minus 20=		. 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		7)		-	X40=			X80=	
MULTIPLE DEPENDENT CLAIM PI			RESENT		· · · · · · · · · · · · · · · · · · ·		ŀ			OR		
* If	the difference	in column 1 is i	less than 70	ro ente	r "∩" in c	eolumn 2	Ĺ	+135=		OR	+270=	
"			less than zero, enter "0" in column 2					TOTAL	:	OR	TOTAL	710.00
	CI	LAIMS AS A (Column 1)	MENDED - PART II (Column 2) (Colum			(Column 3)		SMALL ENTITY			OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEĘ∕
	Total	. 20	Minus	** /	20,	= /		X\$ 9=		OR	X\$18=	(
	Independent	* /	Minus	***	2	= /		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
							L A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE /	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=	
			·				L	TOTAL		OR	TOTAL	
				i	- 3		Α	DDIT. FEE	·	OR	ADDIT. FEE	
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1 -			1	r	
AMENDMENT C		REMAINING AFTER AMENDMENT	4 4	PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL A114	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=										+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL		OR	TOTAL	
***	If the "Highest Nu	mber Previously Pa	aid For" IN THI	S SPACE	is less tha	an 3, enter "3."	^	DDIT. FEE			ADDIT. FEE	L
		ber Previously Pai					er four	nd in the app	propriate box	in co	lumn 1.	